PTO/SB/06 (07-06)

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                 |                                           |                                       |                                                       |                                                                                               |   | Application or Docket Number 10/785,407 |                        |    | ing Date<br>25/2004   | To be Mailed           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------|---------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------|---|-----------------------------------------|------------------------|----|-----------------------|------------------------|
| APPLICATION AS FILED – PART I<br>(Column 1) (Column 2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 |                                           |                                       |                                                       |                                                                                               |   | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |    |                       |                        |
| FOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                 |                                           | JMBER FIL                             | .ED N                                                 | NUMBER EXTRA                                                                                  |   | RATE (\$)                               | FEE (\$)               |    | RATE (\$)             | FEE (\$)               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | BASIC FEE<br>(37 CFR 1.16(a), (b),                              | or (c))                                   | N/A                                   |                                                       | N/A                                                                                           |   | N/A                                     |                        | 1  | N/A                   |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SEARCH FEE<br>(37 CFR 1.16(k), (i),                             | or (m))                                   | N/A                                   |                                                       | N/A                                                                                           |   | N/A                                     |                        | ]  | N/A                   |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | EXAMINATION FE<br>(37 CFR 1.16(a), (p),                         |                                           | N/A                                   |                                                       | N/A                                                                                           |   | N/A                                     |                        |    | N/A                   |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TAL CLAIMS<br>CFR 1.16(i))                                      |                                           | minus 20 =                            |                                                       | •                                                                                             |   | x \$ =                                  |                        | OR | x s =                 |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | EPENDENT CLAIN<br>CFR 1.16(h))                                  | IS .                                      | minus 3 =                             |                                                       | •                                                                                             |   | x \$ =                                  |                        | 1  | x \$ =                |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | APPLICATION SIZE<br>(37 CFR 1.16(s))                            | FEE shee is \$2 addit                     | ts of pape<br>50 (\$125<br>ional 50 s | er, the applica<br>for small entit<br>sheets or fract | rings exceed 100<br>tion size fee due<br>by) for each<br>tion thereof, See<br>87 CFR 1.16(s). |   |                                         |                        |    |                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                           |                                       |                                                       |                                                                                               | L |                                         |                        | 1  |                       |                        |
| * If                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | the difference in col                                           | umn 1 is less than                        | r "0" in column 2                     |                                                       | TOTAL                                                                                         |   | ]                                       | TOTAL                  |    |                       |                        |
| APPLICATION AS AMENDED - PART II  OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                 |                                           |                                       |                                                       |                                                                                               |   |                                         |                        |    |                       |                        |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 11/07/2007                                                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR           | PRESENT<br>EXTRA                                                                              | ╛ | RATE (\$)                               | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Total (37 CFR<br>1.16(i))                                       | · 18                                      | Minus                                 | 20                                                    | = 0                                                                                           |   | x \$ =                                  |                        | OR | X \$50=               | 0                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Independent<br>(37 CFR 1.16(h))                                 | ٠8                                        | Minus                                 | <del></del> 8                                         | = 0                                                                                           |   | x \$ =                                  |                        | OR | X \$210=              | 0                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Application Size Fee (37 CFR 1.16(s))                           |                                           |                                       |                                                       |                                                                                               |   |                                         |                        | ᆫ  |                       |                        |
| ľ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |                                           |                                       |                                                       |                                                                                               |   |                                         |                        | OR |                       |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                           |                                       |                                                       |                                                                                               |   | TOTAL<br>ADD'L<br>FEE                   |                        | OR | TOTAL<br>ADD'L<br>FEE | 0                      |
| (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                 |                                           |                                       |                                                       |                                                                                               |   |                                         |                        |    |                       |                        |
| AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSL'<br>PAID FOR           | PRESENT<br>EXTRA                                                                              |   | RATE (\$)                               | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Total (37 CFR<br>1,18(i))                                       |                                           | Minus                                 |                                                       | =                                                                                             | 1 | x \$ =                                  |                        | OR | x \$ =                |                        |
| Š                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Independent<br>(37 CFR 1.16(h))                                 |                                           | Minus                                 | ***                                                   | =                                                                                             | ] | x \$ =                                  |                        | OR | x s =                 |                        |
| Ξ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Application Size Fee (37 CFR 1.16(s))                           |                                           |                                       |                                                       |                                                                                               | 1 |                                         |                        | l  |                       |                        |
| ΑŞ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |                                           |                                       |                                                       |                                                                                               | L |                                         |                        | OR |                       |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                           |                                       |                                                       |                                                                                               | _ | TOTAL<br>ADD'L<br>FEE                   |                        | OR | TOTAL<br>ADD'L<br>FEE |                        |
| If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  If the "Highest Number Previously Paid or "in THIS SPACE is less than 20, enter 20".  If the "Highest Number Previously Paid for "in THIS SPACE is less than 3, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 3, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, enter 20".  Mamyer Wagstaff  The "Highest Number Previously Paid for "in THIS SPACE is less than 5, en |                                                                 |                                           |                                       |                                                       |                                                                                               |   |                                         |                        |    |                       |                        |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, process) an application. Confidentially is governed by 30.53.C. 122 and 37.24.F. I mis collection to the sendated to lake 12 intended to complete a policy against any preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual sea. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.